

PRINTED: 12/29/2017
FORM APPROVED

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN7503	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 12/20/2017
NAME OF PROVIDER OR SUPPLIER DIVERSICARE OF SMYRNA		STREET ADDRESS, CITY, STATE, ZIP CODE 200 MAYFIELD DRIVE SMYRNA, TN 37167			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
N 000	Initial Comments A licensure survey was completed 12/18/17 -12/20/17 at Diversicare of Symrna. Deficiencies were cited under Chapter 1200-8-6, Standards for Nursing Homes.	N 000			
N 415	1200-8-6-.04(10) Administration (10) When licensure is applicable for a particular job, verification of the current license must be included as a part of the personnel file. Each personnel file shall contain accurate information as to the education, training, experience and personnel background of the employee. Documentation that references were verified shall be on file. Documentation that all appropriate abuse registries have been checked shall be on file. Adequate medical screenings to exclude communicable disease shall be required of each employee. This Rule is not met as evidenced by: Based on review of facility employee files and interview, the facility failed to ensure adequate medical screenings to exclude communicable diseases for 5 (#1, #2, #3, #4, #5) of 5 employee files reviewed. The findings included: Review of employee files revealed no documentation verifying the employees were free from tuberculosis for 5 of 5 employee files. Further review revealed no documentation the employees were offered Hepatitis B vaccination or signed a declination for 4 (#1, #2, #4, #5) of 5 employee files.	N 415	N415 All employee health files have been reviewed for TB screening and the offering with the acceptance or declination documentation for the Hepatitis B vaccinations. All employees that were found to be lacking have been provided additional TB screening and the offering/information on the Hepatitis B vaccination has been provided to those employees. If accepted the vaccination was provided and is included in the employee health record. If the vaccination is declined, the signed declination form will be included in the employee health file. The health screening/testing and vaccination offering and documentation for all new hires will be reviewed by the administrator and clinical educator to maintain continued compliance. The review of the employee health file audit will be reviewed during the center QAPI meeting. The clinical educator will report at the QAPI meeting on the status of new hires health files. The QAPI is attended by the Medical Director, Administrator, DNS, ADNS, Clinical Educator, Dietary Manager, Social Services, Activities Director, Rehab Director, Maintenance Supervisor, CNA and Business Office Manager		

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

4890

GH7811

If continuation sheet 1 of 3

2/15/18

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N 415	Continued From page 1 Interview with the Administrator on 12/20/17 at 2:50 PM in her office confirmed the facility failed to ensure employees had adequate medical screening to exclude communicable diseases.	N 415		
N 643	1200-08-06-.06(3)(i) Basic Services (i) A Nursing Home shall have an annual influenza vaccination program which shall include at least: 1. The offer of influenza vaccination to all staff and independent practitioners at no cost to the person or acceptance of documented evidence of vaccination from another vaccine source or facility. The Nursing Home will encourage all staff and independent practitioners to obtain an influenza vaccination; 2. A signed declination statement on record from all who refuse the influenza vaccination for reasons other than medical contraindications (a sample form is available at http://tennessee.gov/health/topic/hof-provider); 3. Education of all employees about the following: (i) Flu vaccination, (ii) Non-vaccine control measures, and (iii) The diagnosis, transmission, and potential impact of influenza; 4. An annual evaluation of the influenza vaccination program and reasons for non-participation; and	N 643	N643 All employee health files have been reviewed for evidence that the current flu vaccine was offered and administered or offered and declined. All employees that were found to be lacking the acceptance/declination documentation have been provided additional flu vaccine information. If accepted the vaccination was provided and is included in the employee health record. If the vaccination is declined, the signed declination form will be included in the employee health file. Flu vaccines will continue to be offered throughout the active flu season to all newly hired staff and the acceptance or declination documentation will be kept in the employee health file. The health screening/testing and vaccination offering and documentation for all new hires will be reviewed by the administrator and clinical educator to maintain continued compliance. The review of the employee health file audit will be reviewed during the center QAPI meeting. The clinical educator will report at the QAPI meeting on the status of new hires health files. The QAPI is attended by the Medical Director, Administrator, DNS, ADNS, Clinical Educator, Dietary Manager, Social Services, Activities Director, Rehab Director, Maintenance Supervisor, CNA and Business Office Manager.	

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N 643	Continued From page 2 5. A statement that the requirements to complete vaccinations or declination statements shall be suspended by the administrator in the event of a vaccine shortage as declared by the Commissioner or the Commissioner's designee. This Rule is not met as evidenced by: Based on review of facility employee files and interview, the facility failed to offer the influenza vaccination for 4 (#1, #2, #3, #5) of 5 employee files reviewed. The findings included: Review of employee files revealed no documentation 4 of 5 employees were offered the influenza vaccination or signed a declination. Interview with the Administrator on 12/20/17 at 2:50 PM in her office confirmed the facility failed to offer the influenza vaccination to 4 of 5 employees.	N 643			

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If continued, sheet 3 of 3